

W4000080036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

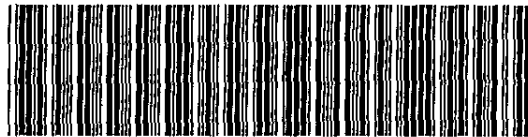
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DEPT. OF STATE
TALLAHASSEE, FLORIDA

NOV 1 2004

FILED

W4-80036
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WALTER R. MOON, P.A.

ATTORNEY AT LAW

WALTER R. MOON
ATTORNEY AT LAW

JUDY JOHNSON
LEGAL ASSISTANT

JANE B. MOON
CERTIFIED LEGAL ASSISTANT

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ORLANDO, FLORIDA 32803
(407) 898-6600

FACSIMILE
(407) 898-1032

WEBSITE:
YP.BELLSOUTH.COM/SITES/
WALTERMOONPA

October 28, 2004

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: AMed Solutions, L.L.C.

Dear Sir:

Enclosed please find the original Articles of Organization for the new limited liability corporation listed above. Enclosed is our check in the amount of \$125.00 which represents the following:

Filing Fee and Registered Agent Designation	<u>\$125.00</u>
Total Filing Fee	\$125.00

Thank you for your assistance in this matter and if you need anything additional, please let us know.

Sincerely,



Jane B. Moon, CLA
Certified Legal Assistant

/jbm
Enclosure

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

OCT 29 1 17 PM 2004

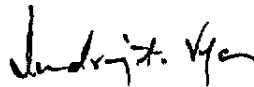
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JAN 11 1961
TALLAHASSEE, FLORIDA

**ARTICLE VI.
MEMBERS RIGHTS TO CONTINUE BUSINESS**

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be pursuant to the terms of the Bylaws adopted by the Limited Liability Company.

Dated this 27 day of ~~August~~^{October}, 2004.



INDRAJIT C. VYAS
and Member

STATE OF FLORIDA
COUNTY OF ORANGE

BEFORE ME, a notary public authorized to take acknowledgments in the state and county named above personally appeared INDRAJIT C. VYAS, to be well known to be the person described in the foregoing Articles of Organization and he acknowledged before me that he executed said Articles of Organization.

Witness my hand and official seal this 27 day of October, 2004.



NOTARY PUBLIC
My Commission Expires:



Walter R. Moon
MY COMMISSION # DD229963 EXPIRES
September 4, 2007
BONDED THRU TROY FAIR INSURANCE, INC.


FILED
OCT 27 2004
TALAHASSEE, FLORIDA

REGISTERED AGENT

The name and Florida street address of the registered agent are:

WALTER R. MOON
200 North Primrose Drive
Orlando, Fl. 32803

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.


WALTER R. MOON
Registered Agent

FILED

04 NOV - 1 PM 2:00
CLERK OF STATE
TALLAHASSEE, FLORIDA